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3738
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/018,046	
	Filing Date	May 7, 2002	
	First Named Inventor	Gramnas	
	Group Art Unit	3738	
	Examiner Name	A. Stewart	
Total Number of Pages in This Submission		Attorney Docket Number	GRA-101US

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	John E. Munger, Reg. No. 37,685 Jansson, Shupe & Munger, Ltd. 245 Main Street, Racine, WI 53403
Signature	
Date	April 8, 2005

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the			
Typed or printed name	Chris Wipper		
Signature		Date	April 8, 2005

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AMENDMENT TRANSMITTAL LETTER (Large Entity)

Applicant(s): Gramnas

APR 12 2005

Pocket No.

GRA-101US

Application No.

10/018,046

Filing Date

05/07/2002

Examiner

Alvin Stewart

Customer No.

24314

Group An Unit

3738

Confirmation No.

6154

Invention: A Device in a Leg Prosthesis Provided with a Foot

COMMISSIONER FOR PATENTS:

Transmitted herewith is an amendment in the above-identified application.

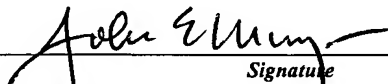
The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED

	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	15 -	23 =	0	x \$50.00	\$0.00
INDEP. CLAIMS	3 -	3 =	0	x \$200.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00

- ☒ No additional fee is required for amendment.
- ☐ Please charge Deposit Account No. _____ in the amount of _____
- ☐ A check in the amount of _____ to cover the filing fee is enclosed.
- ☒ The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 10-0270
- ☒ Any additional filing fees required under 37 C.F.R. 1.16.
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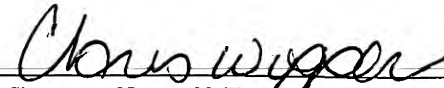
John E. Munger, Reg. No. 37,685
Jansson, Shupe & Munger, Ltd.
245 Main Street
Racine, WI 53403
262/632-6900

Dated: April 8, 2005

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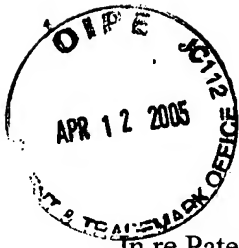


Signature of Person Mailing Correspondence

Chris Wipper

Typed or Printed Name of Person Mailing Correspondence

cc:



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:

Finn Gramnäs

Attorney Docket No. GRA-101US

Serial No. 10/018,046

Group Art Unit: 3738

Filed: May 7, 2002

Examiner: Alvin J. Stewart

Title: A Device In A Leg Prosthesis Provided With A Foot

* * * * *

April 8, 2005

MAIL STOP AMENDMENT
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT

Sir:

In response to the Notice of Non-Compliant Amendment of April 4, 2005, please
amend/correct the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this
paper.

Remarks/Arguments begin on page 12 of this paper.